



REDACTED VERSION

**Outdoor Air Pollution****INTAKE DETAILS:**

Request Number: 101001299019

Create Date: 2014-03-06

Caller Name: (b) (6)

Create Time: 16:15

Created By: Rhonda Roberson

Caller Phone: (b) (6)

Caller Email: (b) (6)

Caller Address: (b) (6)

Request Address: 4904 GRIGGS , HOUSTON TEXAS 77021

Location Name: Key Map: 534J

Council District: D

Super Neighborhood: GREATER OST / SOUTH UNION

**FYI/Instructions:**

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company / describe the place producing the pollution.

CEF Environmental Services

What type of air pollution is present?

Dust  
Idling Vehicle  
**Smoke**  
Other - Describe in Additional Information

&gt;&gt;

&gt;

Odor

&lt;

&lt;&lt;



What does the air pollution look like?

n/a

What does the pollution smell or taste like? (remind you of what?)

foul chemical odor

Did the pollution affect health or property? (Pick from list ONLY)

>>

Fish Dead

Grass dead

House Paint discolored or peeling

Nausea

>

Headache

Eyes burning

<

<<

What Day did this begin?

01/01/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

08:00

How often does this occur?

daily

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

08:00

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Word of Mouth

Additional Information:

=====

## RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action

☐☐



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

**Division**  
**Group**

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001301475      Create Date: 2014-03-09  
Caller Name: (b) (6)      Create Time: 09:16  
Caller Phone: (b) (6)      Created By: Daniela Garcia  
Caller Address: (b) (6)      Caller Email:

Request  
Address:

(b) (6)

Location Name:      Key Map:      534J  
Council District: D      Super  
Neighborhood: GREATER OST / SOUTH UNION

FYI/Instructions:      This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company /  
describe the place  
producing the pollution.

environmental company on griggs road  
closed down

What type of air pollution  
is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

>>

>

<

<<

Odor



What does the air pollution look like?

clear

What does the pollution smell or taste like? (remind you of what?)

chemicals

Did the pollution affect health or property? (Pick from list ONLY)

>>

Car Paint spotty or peeling

Dizziness

Eyes burning

Fish Dead

>

Breathing trouble

<

<<

What Day did this begin?

03/09/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

08:00

How often does this occur?

every time it rains in the area

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

07:00

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

Additional Information:

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=====

RESOLUTION

What is the Industry Type of the Polluter?

Automotive Repair Shop

What type of air pollution is determined?

Vehicle Exhaust

No enforcement action

☐



**Notice of Violation (NoV)**

issued

Citation issued

☐

**Source Registration:**

**Reason:**

**Refer to Source  
Registration for  
Confirmation:**

☐

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**

Select the appropriate Resolution SR Type from the lists provided below to indicate the work that is required to resolve the issue

**Select Group:**

**Select Resolution SR  
Type:**

**Department  
Type**


**Division  
Group**


**SLA**

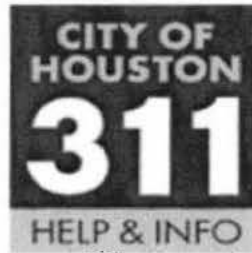
**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001309916

Create Date: 2014-03-16

Caller Name:

(b) (6)

Create Time: 12:32

Created By:

Carolyn Ethridge

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request

(b) (6)

Address:

Location Name: Key Map: 534N

Council District: D

Super  
Neighborhood:

GREATER OST / SOUTH  
UNION

FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company /  
describe the place  
producing the pollution.

What type of air pollution  
is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

>>

>

Odor

<

<<



What does the air pollution look like?

No Visual

What does the pollution smell or taste like? (remind you of what?)

Neighbor says it smells like gas or other cleaning chemical-type smell.

Did the pollution affect health or property? (Pick from list ONLY)

Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Eyes burning

>>

>

<

<<

No Effect Noticed

What Day did this begin?

03/16/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

08:00

How often does this occur?

Just this time

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

08:00

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

Additional Information:

Smells like a cleaning chemical.

=====

RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

☐

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

☐

**Resolution Comments:**

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**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

<input type="text"/>	<b>Division</b>
<input type="text"/>	<b>Group</b>

<input type="text"/>
<input type="text"/>

**SLA**

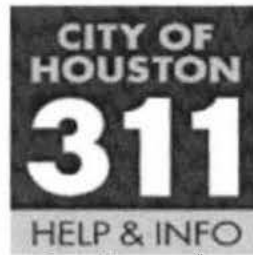
**CodebookCodeCompare**

**SUBMIT**

**PRINT**

**SUBMIT AND CHANGE SR TYPE**



**Outdoor Air Pollution****INTAKE DETAILS:**

Request Number: 101001309931

Create Date: 2014-03-16

Caller Name:

(b) (6)

Create Time: 13:19

Created By:

Christina Martinez

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request

(b) (6)

Address:

Location Name: Key Map: 534N

Council District: D

Super  
Neighborhood:GREATER OST / SOUTH  
UNION

FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.Name the company /  
describe the place  
producing the pollution.

CES

What type of air pollution  
is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

&gt;&gt;

&gt;

Odor

&lt;

&lt;&lt;



What does the air pollution look like?

UNKNOWN

What does the pollution smell or taste like? (remind you of what?)

CHEMICAL SMELL

Did the pollution affect health or property? (Pick from list ONLY)

>>

Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Eyes burning

>

Headache

<

<<

What Day did this begin?

03/15/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

06:00

How often does this occur?

JUST ABOUT EVERY WEEK

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

06:30

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

Additional Information:

=====

RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action

☐☐



**Notice of Violation (NoV)  
issued**

**Citation issued**

☐

**Source Registration:**

**Reason:**

**Refer to Source  
Registration for  
Confirmation:**

☐

**Resolution Comments:**

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Select the appropriate Resolution SR Type from the lists provided below to indicate the work that is required to resolve the issue

**Select Group:**

**Select Resolution SR  
Type:**

**Department  
Type**

<input type="text"/>	<b>Division</b>
<input type="text"/>	<b>Group</b>

**SLA**

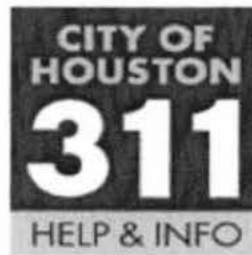
**CodebookCodeCompare**

**SUBMIT**

**PRINT**

**SUBMIT AND CHANGE SR TYPE**





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001310007      Create Date: 2014-03-16  
Caller Name: (b) (6)      Create Time: 16:58  
Caller Phone: (b) (6)      Created By: Carolyn Ethridge  
Caller Address: (b) (6)      Caller Email:

Request  
Address:

(b) (6)

Location Name: APT LES JARDINS APTS      Key Map: 534J  
Council District: D      Super Neighborhood: GREATER OST / SOUTH UNION

FYI/Instructions: This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company /  
describe the place  
producing the pollution.

CES Environmental

What type of air pollution  
is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

>>

>

Odor

<

<<



What does the air pollution look like?

Invisible

What does the pollution smell or taste like? (remind you of what?)

Gassy/Chemical odor

Did the pollution affect health or property? (Pick from list ONLY)

>>

Breathing trouble  
Car Paint spotty or peeling  
Eyes burning  
Fish Dead

>

Headache  
Dizziness

<

<<

What Day did this begin?

03/16/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

08:00

How often does this occur?

2-3 times per month

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

08:00

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

#### Additional Information:

Name of Company: CES Environmental. Will call Media also.

#### RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

<input type="text"/>	<b>Division</b>
<input type="text"/>	<b>Group</b>

<input type="text"/>
<input type="text"/>

**SLA**

**CodebookCodeCompare**

**SUBMIT**

**PRINT**

**SUBMIT AND CHANGE SR TYPE**





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001310672

Create Date: 2014-03-17

Caller Name:

(b) (6)

Create Time: 11:35

Created By:

Isabel Flores

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request Address: 4904 GRIGGS , HOUSTON TEXAS 77021

Location Name: Key Map: 534J

Council District: D

Super Neighborhood: GREATER OST / SOUTH UNION

### FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company / describe the place producing the pollution.

CES ENVIRONMENTAL SERVICES

What type of air pollution is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

>>

>

Odor

<

<<



What does the air pollution look like?

N/A

What does the pollution smell or taste like? (remind you of what?)

CHEMICAL SMAELL // BURNS NOSE

Did the pollution affect health or property? (Pick from list ONLY)

Car Paint spotty or peeling  
Dizziness  
Eyes burning  
Fish Dead

Nose burning  
Breathing trouble  
Headache

What Day did this begin?

03/16/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

07:00

How often does this occur?

DAILY 7 AM 6 PM

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

07:00

Are you available for an investigator to contact you?

Visit in person

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

#### Additional Information:

States this is an ongoing issue and HFD/Hazmat crew was out on yesterday. States company is supposed to be closing and believes they are not disposing of chemicals properly. Affecting neighbors health in surround area.

#### RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

**Division**  
**Group**

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001311454

Create Date: 2014-03-17

Caller Name:

(b) (6)

Create Time: 18:35

Created By: Craig Fleming

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request Address: 4910 GRIGGS , HOUSTON TEXAS 77021

Location Name: Key Map: 534J

Council District: D

Super Neighborhood: GREATER OST / SOUTH UNION

FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company / describe the place producing the pollution.

SOME ENVIRONMENTAL COMPANY..

What type of air pollution is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

>>

>

Odor

<

<<



What does the air pollution look like?

NOTHING

What does the pollution smell or taste like? (remind you of what?)

SMELL LIKE SOME STRONG CHEMICAL MIXTURE.. POISING..

Did the pollution affect health or property? (Pick from list ONLY)

>>

Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Eyes burning

>

Nausea

<

<<

What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

16:00

How often does this occur?

JUST NOW

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

Additional Information:

=====

RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

**Division**  
**Group**

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001311535      Create Date: 2014-03-17  
 Caller Name: (b) (6)      Create Time: 20:48  
 Caller Phone:      Created By: Cicelyn Davis  
 Caller Address: (b) (6)      Caller Email:

Request (b) (6)  
 Address:

Location Name:      Key Map: 534K  
 Council District: D      Super Neighborhood: GREATER OST / SOUTH UNION

FYI/Instructions: This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company / describe the place producing the pollution.

CES Environmental

What type of air pollution is present?

Dust  
 Idling Vehicle  
**Smoke**  
 Other - Describe in Additional Information

>>  
 > Odor  
 <  
 <<



What does the air pollution look like?

Chemical

What does the pollution smell or taste like? (remind you of what?)

Chemical

Did the pollution affect health or property? (Pick from list ONLY)

>>

Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Eyes burning

>

<

<<

What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

19:00

How often does this occur?

Not sure

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Word of Mouth

Additional Information:

=====

**RESOLUTION**

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action

☐



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

☐

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**


**Division**  
**Group**


**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001311551

Create Date: 2014-03-17

Caller Name:

(b) (6)

Create Time: 21:45

Created By:

Kimberly Carrier

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request

(b) (6)

Address:

Location Name: Key Map: 534E

Council District: D

Super  
Neighborhood:

GREATER OST / SOUTH  
UNION

FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company /  
describe the place  
producing the pollution.

Ges Enviromental

What type of air pollution  
is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

>>

>

Odor

<

<<



What does the air pollution look like?

no look

What does the pollution smell or taste like? (remind you of what?)

chemical

Did the pollution affect health or property? (Pick from list ONLY)

>>

Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Eyes burning

>

Nausea

<

<<

What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

07:00

How often does this occur?

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

07:00

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

Additional Information:

=====

RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action

☐

☐



**Notice of Violation (NoV)**  
**issued**  
**Citation issued** ☐

**Source Registration:**

**Reason:**

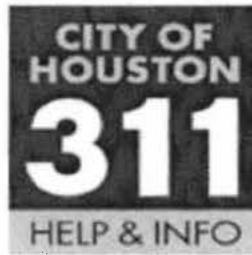
**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
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<b>Select Group:</b>	<b>Select Resolution SR</b>
<b>Department</b>	<b>Type:</b>
<input type="text"/>	<input type="text"/>
<b>Type</b>	<b>Division</b>
<input type="text"/>	<input type="text"/>
<b>SLA</b>	<b>Group</b>
<input type="text"/>	<input type="text"/>
	<b>CodebookCodeCompare</b>
	<input type="text"/>





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001311553

Create Date: 2014-03-17

Caller Name:

(b) (6)

Create Time: 21:47

Created By:

Natalie Cabrera

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request

(b) (6)

Address:

Location Name: Key Map: 534E

Council District: D

Super  
Neighborhood:

GREATER OST / SOUTH  
UNION

FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company /  
describe the place  
producing the pollution.

What type of air pollution  
is present?

Dust  
Idling Vehicle  
**Smoke**  
Other - Describe in Additional Information

>>

>

Odor

<

<<



What does the air pollution look like?

What does the pollution smell or taste like? (remind you of what?)

Did the pollution affect health or property? (Pick from list ONLY)

Car Paint spotty or peeling  
Dizziness  
Eyes burning  
Fish Dead

>>

>

<

<<

Nausea  
Breathing trouble

What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

09:30

How often does this occur?

1st time

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

09:30

Are you available for an investigator to contact you?

Telephone Call Only

Social Media

How did you know to call 311 for your environmental concerns?

Additional Information:

the son in law called in the report pls help.

## RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

☐

**Source Registration:**

**Reason:**

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**Registration for**  
**Confirmation:**

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**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

<input type="text"/>	<b>Division</b>
<input type="text"/>	<b>Group</b>

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001311557

Create Date: 2014-03-17

Caller Name:

(b) (6)

Create Time: 21:52

Created By:

Christina Martinez

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request

(b) (6)

Address:

Location Name: Key Map: 534J

Council District: D

Super

Neighborhood:

GREATER OST / SOUTH UNION

FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company / describe the place producing the pollution.

What type of air pollution is present?

Dust  
Idling Vehicle  
**Smoke**  
Other - Describe in Additional Information

>>

>

<

<<

Odor



What does the air pollution look like?

UNKNOWN

What does the pollution smell or taste like? (remind you of what?)

UNKNOWN

Did the pollution affect health or property? (Pick from list ONLY)

>>

Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Eyes burning

>

Other- Describe in Additional Info

<

<<

What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

08:00

How often does this occur?

NOT OFTEN

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

08:00

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

#### Additional Information:

CAUSING CALLER TO HAVE A SCRATCHY THROAT

(b) (6)

#### RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action

☐
☐



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

☐

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**



**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

<input type="text"/>	<b>Division</b>
<input type="text"/>	<b>Group</b>

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE



**Outdoor Air Pollution****INTAKE DETAILS:**

Request Number: 101001311566

Create Date: 2014-03-17

Caller Name:

(b) (6)

Create Time: 22:50

Created By:

Audrey Owens

Caller Phone:

Caller Email:

Caller Address:

Request 4904 GRIGGS , HOUSTON TEXAS 77021  
Address:

Location Name: Key Map: 534J

Council District: D

Super  
Neighborhood: GREATER OST / SOUTH  
UNION**FYI/Instructions:**

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company /  
describe the place  
producing the pollution.

What type of air pollution  
is present?

Dust  
Idling Vehicle  
**Smoke**  
Other - Describe in Additional Information

&gt;&gt;

&gt;

Odor

&lt;

&lt;&lt;



What does the air pollution look like?

What does the pollution smell or taste like? (remind you of what?)

Did the pollution affect health or property? (Pick from list ONLY)

&gt;&gt;

Breathing trouble  
Car Paint spotty or peeling  
Eyes burning  
Fish Dead

&gt;

Dizziness  
Headache  
Nausea

&lt;

&lt;&lt;

What Day did this begin?

On that day, what Time did this begin? (24 Hour

Format: Add 12 to all PM

times. Example - 4:20 PM = 16:20)

How often does this occur?

At what time does it usually occur? (24 Hour

Format: Add 12 to all PM

times. Example - 4:20 PM = 16:20)

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Word of Mouth

Additional Information:

=====

RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action

☐



**Notice of Violation (NoV)**  
**issued**  
**Citation issued** ☐

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
 Select the appropriate Resolution SR Type from the lists provided below to indicate the work that is required to resolve the issue

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

**Division**  
**Group**

**SLA**

**CodebookCodeCompare**

**SUBMIT**

**PRINT**

**SUBMIT AND CHANGE SR TYPE**





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001311567

Create Date: 2014-03-17

Caller Name:

(b) (6)

Create Time: 22:51

Created By:

Natalie Cabrera

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request

Address:

(b) (6)

Location Name: Key Map: 534E

Council District: D

Super

Neighborhood:

GREATER OST / SOUTH  
UNION

FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company /  
describe the place  
producing the pollution.

What type of air pollution  
is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

>>

>

Odor

<

<<



What does the air pollution look like?

n/a

What does the pollution smell or taste like? (remind you of what?)

chemical

Did the pollution affect health or property? (Pick from list ONLY)

>>

Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Eyes burning

>

Headache

<

<<

What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

10:50

How often does this occur?

daily

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

11:00

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

**Additional Information:**

caller states the smell happens thru out the day but today is very bad ...pls help

**RESOLUTION**

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action

☐
☐



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

☐

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

<input type="text"/>	<b>Division</b>
<input type="text"/>	<b>Group</b>

<input type="text"/>
<input type="text"/>

**SLA**

**CodebookCodeCompare**

**SUBMIT**

**PRINT**

**SUBMIT AND CHANGE SR TYPE**





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001311573

Create Date: 2014-03-17

Caller Name: (b) (6)

Create Time: 23:24  
Created By: Natalie Cabrera

Caller Phone: (b) (6)

Caller Email:

Caller Address: (b) (6)

Request Address: (b) (6)

Location Name: Key Map: 534J

Council District: D

Super Neighborhood: GREATER OST / SOUTH UNION

**FYI/Instructions:** This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company / describe the place producing the pollution.

What type of air pollution is present?

Dust  
Idling Vehicle  
**Smoke**  
Other - Describe in Additional Information



> Odor

<





What does the air pollution look like?

What does the pollution smell or taste like? (remind you of what?)

Did the pollution affect health or property? (Pick from list ONLY)



Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Eyes burning



Other- Describe in Additional Info



What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

11:00

How often does this occur?

DAILY

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

11:00

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

**Additional Information:**

CALLER STATES THIS ODOR

**RESOLUTION**

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action

☐
☐



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

**Division**  
**Group**

<input type="text"/>
<input type="text"/>

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001311575      Create Date: 2014-03-17  
 Caller Name: (b) (6)      Create Time: 23:30  
 Caller Phone: (b) (6)      Created By: Christina Martinez  
 Caller Address: (b) (6)      Caller Email:

Request  
Address:

(b) (6)

Location Name:      Key Map:      534E  
 Council District: D      Super Neighborhood:      MACGREGOR

**FYI/Instructions:**      This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company / describe the place producing the pollution.

What type of air pollution is present?

Dust  
 Idling Vehicle  
**Smoke**  
 Other - Describe in Additional Information

>>

>      Odor

<

<<



What does the air pollution look like?

UNKNOWN

What does the pollution smell or taste like? (remind you of what?)

UNKNOWN

Did the pollution affect health or property? (Pick from list ONLY)

Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Eyes burning

>>

>

<

<<

No Effect Noticed

What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

07:00

How often does this occur?

TODAY

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

07:00

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

Additional Information:

---

=====

RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action

☐



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

☐

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

<input type="text"/>	<b>Division</b>
<input type="text"/>	<b>Group</b>

<input type="text"/>
<input type="text"/>

**SLA**

**CodebookCodeCompare**

**SUBMIT**

**PRINT**

**SUBMIT AND CHANGE SR TYPE**





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001311577

Create Date: 2014-03-17

Caller Name:

(b) (6)

Create Time: 23:40

Created By:

Kimberly Carrier

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request

(b) (6)

Address:

Location Name: Key Map: 534J

Council District: D

Super

Neighborhood:

GREATER OST / SOUTH  
UNION

FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company /  
describe the place  
producing the pollution.

GES Enivromental

What type of air pollution  
is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

>>

>

Odor

<

<<



What does the air pollution look like?

Colorless
Naphtha Benzene

What does the pollution smell or taste like? (remind you of what?)

Did the pollution affect health or property? (Pick from list ONLY)

Breathing trouble	>	Eyes burning
Car Paint spotty or peeling	>	Headache
Dizziness	<	
Fish Dead	<<	

What Day did this begin?

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

How often does this occur?

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Word of Mouth

Additional Information:

# RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action

☐



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
 Select the appropriate Resolution SR Type from the lists provided below to indicate the work that is required to resolve the issue

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

**Division**  
**Group**

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE



**Outdoor Air Pollution****INTAKE DETAILS:**

Request Number: 101001311832

Create Date: 2014-03-18

Caller Name:

(b) (6)

Create Time: 09:13

Created By: Victor Berrones

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request 4827 GRIGGS , HOUSTON TEXAS 77021  
Address:

Location Name: Key Map: 534J

Council District: D

Super Neighborhood: GREATER OST / SOUTH UNION

**FYI/Instructions:**

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company / describe the place producing the pollution.

NOT SURE WHERE ITS COMING FROM, BUT ITS A VERY STRONG ODOR

What type of air pollution is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

&gt;&gt;

&gt;

Odor

&lt;

&lt;&lt;



What does the air pollution look like?

NOT VISIBLE

What does the pollution smell or taste like? (remind you of what?)

CHEMICAL SMELL, AMONIA LIKE

Did the pollution affect health or property? (Pick from list ONLY)

>>

Car Paint spotty or peeling  
Dizziness  
Fish Dead  
Grass dead

>

<

<<

Breathing trouble  
Eyes burning  
Nausea  
Skin burns

What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

10:00

How often does this occur?

2 YEARS AGO WAS TEH LAST INCIDENT

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

10:00

Are you available for an investigator to contact you?

Telephone Call Only

Word of Mouth

How did you know to call 311 for your environmental concerns?

Additional Information:

=====

RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action



**Notice of Violation (NoV)**

**issued**

**Citation issued**

**Source Registration:**

**Reason:**

**Refer to Source**

**Registration for**

**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**

Select the appropriate Resolution SR Type from the lists provided below to indicate the work that is required to resolve the issue

**Select Group:**

**Select Resolution SR**

**Type:**

**Department**

**Division**

**Type**

**Group**

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001311978

Create Date: 2014-03-18

Caller Name:

(b) (6)

Create Time: 10:25

Created By:

Shelia Graham-Cobb

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request

(b) (6)

Address:

Location Name: Key Map: 534E

Council District: D

Super

Neighborhood:

GREATER OST / SOUTH  
UNION

FYI/Instructions:

This form is to report air pollution. The content of this report is kept CONFIDENTIAL.

Name the company /  
describe the place  
producing the pollution.

What type of air pollution  
is present?

>>

> Droplets  
Dust  
< Idling Vehicle  
Odor

<<



What does the air pollution look like?

CHEMICAL SMELL

What does the pollution smell or taste like? (remind you of what?)

Did the pollution affect health or property? (Pick from list ONLY)

Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Eyes burning



What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

How often does this occur?

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

Are you available for an investigator to contact you?

Telephone Call Only ☒

How did you know to call 311 for your environmental concerns?

Word of Mouth ☒

**Additional Information:**

CALLER STATES THAT IT LAST NIGHT.

=====

**RESOLUTION**

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action ☐

☐
☐



**Notice of Violation (NoV)  
issued**  
**Citation issued**

☐

**Source Registration:**

**Reason:**

**Refer to Source  
Registration for  
Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
Select the appropriate Resolution SR Type from the lists provided below to indicate the work that is required to resolve the issue

**Select Group:**

**Select Resolution SR  
Type:**

**Department  
Type**

<input type="text"/>	<b>Division</b>
<input type="text"/>	<b>Group</b>

<input type="text"/>
<input type="text"/>

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE



**Outdoor Air Pollution****INTAKE DETAILS:**

Request Number: 101001312168 Create Date: 2014-03-18

Create Time: 11:53

Caller Name: Created By: Pamela Simmons

Caller Phone: Caller Email:

Caller Address:

Request 4904 GRIGGS , HOUSTON TEXAS 77021  
Address:

Location Name: Key Map: 534J

Council District: D Super Neighborhood: GREATER OST / SOUTH UNION

**FYI/Instructions:** This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

**Name the company / describe the place producing the pollution.**

CES ENVIRONMENTAL PLANT

**What type of air pollution is present?**

Dust  
Idling Vehicle  
**Smoke**  
Other - Describe in Additional Information

&gt;&gt;

&gt;

Odor

&lt;

&lt;&lt;



What does the air pollution look like?

NONE

What does the pollution smell or taste like? (remind you of what?)

GAS

Did the pollution affect health or property? (Pick from list ONLY)

Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Fish Dead

>>

>

Eyes burning

<

<<

What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

16:30

How often does this occur?

2-3HOURS

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

11:00

Are you available for an investigator to contact you?

Later - Not now

How did you know to call 311 for your environmental concerns?

Community Event

#### Additional Information:

ON GRIGGS FROM CULLEN TO CALHOUN-MLK

#### RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

☐

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

<input type="text"/>	<b>Division</b>
<input type="text"/>	<b>Group</b>

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001312232

Create Date: 2014-03-18

Caller Name:

(b) (6)

Create Time:

12:24

Created By:

LaTonya Montena

Caller Phone:

Caller Email:

Caller Address:

Request

(b) (6)

(b) (6)

Address:

City

Location Name: Key Map: 534E

Council District: D

Super Neighborhood: MACGREGOR

FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company / describe the place producing the pollution.

UNKNOWN

What type of air pollution is present?

Dust  
Idling Vehicle  
**Smoke**  
Other - Describe in Additional Information

>> Odor  
>  
<





N/A

**What does the air pollution look like?**

VERY STRONG CHEMICALS

**What does the pollution smell or taste like? (remind you of what?)**

**Did the pollution affect health or property? (Pick from list ONLY)**



Breathing trouble  
Car Paint spotty or peeling  
Dizziness  
Fish Dead



Eyes burning  
Nose burning



03/17/2014

**What Day did this begin?**

22:00

**On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)**

JUST STARTED YESTERDAY FOR THE 1ST TIME

**How often does this occur?**

06:15

**At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)**

Telephone Call Only

**Are you available for an investigator to contact you?**

Already familiar with using 311 for City services

**How did you know to call 311 for your environmental concerns?**

=====

**RESOLUTION**



**Additional Information:****What is the Industry Type of the Polluter?****What type of air pollution is determined?****No enforcement action****Notice of Violation (NoV) issued****Citation issued****Source Registration:****Reason:****Refer to Source Registration for Confirmation:****Resolution Comments:****IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:****Select the appropriate Resolution SR Type from the lists provided below to indicate the work that is required to resolve the issue****Select Group:****Select Resolution SR Type:****Department Type****Division****SLA****Group****CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001312389

Create Date: 2014-03-18

Caller Name:

(b) (6)

Create Time: 13:30

Created By:

Elaine Collins

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request

(b) (6)

Address:

Location Name: Key Map: 534J

Council District: D

Super

Neighborhood:

GREATER OST / SOUTH  
UNION

FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company /  
describe the place  
producing the pollution.

C E S ENVIROMENTAL CO 4904 GRIGGS

What type of air pollution  
is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

>>

>

Odor

<

<<



What does the air pollution look like?

ODOR ONLY

What does the pollution smell or taste like? (remind you of what?)

GAS & PETROLEUM

Did the pollution affect health or property? (Pick from list ONLY)

>>

Car Paint spotty or peeling  
Dizziness  
Fish Dead  
Grass dead

>

<

<<

Breathing trouble  
Eyes burning  
Nausea  
Other- Describe in Additional Info

What Day did this begin?

03/17/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

09:30

How often does this occur?

SUNDAY & MONDAY

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

09:30

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

#### Additional Information:

CORR ADDR 4904 GRIGGS PLEASE MAKE CONTACT WITH (b) (6) COMPANY CLOSED NOW AND CURRENTLY HAVE OPEN CONTAINERS BEHIND BLDG- EPA REPT #1299019

#### RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action



**Notice of Violation (NoV)**  
**issued**  
**Citation issued**

☐

**Source Registration:**

**Reason:**

**Refer to Source**  
**Registration for**  
**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
**Select the appropriate Resolution SR Type from the lists provided below to indicate the**  
**work that is required to resolve the issue**

**Select Group:**

**Select Resolution SR**  
**Type:**

**Department**  
**Type**

<input type="text"/>	<b>Division</b>
<input type="text"/>	<b>Group</b>

<input type="text"/>
<input type="text"/>

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001312568

Create Date: 2014-03-18

Caller Name:

(b) (6)

Create Time: 14:41

Created By:

Pamela Simmons

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request

Address:

(b) (6)

Location Name: Key Map: 534E

Council District: D

Super Neighborhood: GREATER OST / SOUTH UNION

### FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company / describe the place producing the pollution.

What type of air pollution is present?

Dust  
Idling Vehicle  
**Smoke**  
Other - Describe in Additional Information



Odor



What does the air pollution look like?

NO

What does the pollution smell or taste like? (remind you of what?)

CHEMICAL SOLVENT

Did the pollution affect health or property? (Pick from list ONLY)

Car Paint spotty or peeling  
Dizziness  
Eyes burning  
Fish Dead

Breathing trouble

What Day did this begin?

03/18/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

13:40

How often does this occur?

1DAY

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

Additional Information:

## RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action



Notice of Violation (NoV) ☐  
issued

☐



Citation issued

Source Registration:

Reason:

Refer to Source  
Registration for  
Confirmation:

Resolution Comments:

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
Select the appropriate Resolution SR Type from the lists provided below to indicate the work that is required to resolve the issue

Select Group:

Select Resolution SR  
Type:

Department  
Type

<input type="text"/>	Division
<input type="text"/>	Group

SLA

CodebookCodeCompare

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE





## Outdoor Air Pollution

### INTAKE DETAILS:

Request Number: 101001312633

Create Date: 2014-03-18

Caller Name:

(b) (6)

Create Time: 15:05

Created By:

Jacqueline Peevy

Caller Phone:

Caller Email:

Caller Address:

(b) (6)

Request Address: 4904 GRIGGS , HOUSTON TEXAS 77021

Location Name: Key Map: 534J

Council District: D

Super

Neighborhood:

GREATER OST / SOUTH UNION

### FYI/Instructions:

This form is to report air pollution. The content of this report is kept **CONFIDENTIAL**.

Name the company / describe the place producing the pollution.

CES ENV.

What type of air pollution is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

>>

>

Odor

<

<<



What does the air pollution look like?

CITIZEN STATES NO LOOK JUST A SMELL

What does the pollution smell or taste like? (remind you of what?)

SEWER

Did the pollution affect health or property? (Pick from list ONLY)

>>

Car Paint spotty or peeling

>

Breathing trouble

Dizziness

Eyes burning

Fish Dead

<

<<

What Day did this begin?

03/13/2014

On that day, what Time did this begin? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

05:00

How often does this occur?

ALL THE TIME

At what time does it usually occur? (24 Hour Format: Add 12 to all PM times. Example - 4:20 PM = 16:20)

05:00

Are you available for an investigator to contact you?

Telephone Call Only

How did you know to call 311 for your environmental concerns?

Word of Mouth

Additional Information:

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**RESOLUTION**

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action



**Notice of Violation (NoV)**

issued

Citation issued

Source Registration:

Reason:

Refer to Source  
Registration for  
Confirmation:

Resolution Comments:

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**  
Select the appropriate Resolution SR Type from the lists provided below to indicate the work that is required to resolve the issue

Select Group:

Select Resolution SR  
Type:

Department  
Type

Division  
Group

SLA

CodebookCodeCompare

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE



**Outdoor Air Pollution****INTAKE DETAILS:**

Request Number: 101001313309

Create Date: 2014-03-19

Caller Name: (b) (6)

Create Time: 09:01

Created By: JoAnn Moore

Caller Phone:      Caller Email:

Caller Address: (b) (6)

Request      4904 GRIGGS      ,      HOUSTON      TEXAS 77021  
Address:

Location Name:      Key Map:      534J

Council District:      D

Super  
Neighborhood:      GREATER OST / SOUTH  
UNION**FYI/Instructions:**

This form is to report air pollution. The content of this report is  
kept **CONFIDENTIAL**.

Name the company /  
describe the place  
producing the pollution.

CES Environmental

What type of air pollution  
is present?

Dust  
Idling Vehicle  
Smoke  
Other - Describe in Additional Information

&gt;&gt;

&gt;

Odor

&lt;

&lt;&lt;



What does the air pollution look like?

What does the pollution smell or taste like? (remind you of what?)

Did the pollution affect health or property? (Pick from list ONLY)

>>

Car Paint spotty or peeling

Dizziness

Eyes burning

Fish Dead

>

<

<<

Breathing trouble

What Day did this begin?

03/18/2014

On that day, what Time did this begin? (24 Hour

10:45

Format: Add 12 to all PM

times. Example - 4:20 PM = 16:20) = How often does this occur?

Ongoing

At what time does it usually occur? (24 Hour

Format: Add 12 to all PM

times. Example - 4:20 PM = 16:20) = Are you available for an investigator to contact you?

Visit in person

How did you know to call 311 for your environmental concerns?

Already familiar with using 311 for City services

Additional Information:

## RESOLUTION

What is the Industry Type of the Polluter?

What type of air pollution is determined?

No enforcement action



**Notice of Violation (NoV)**

**issued**

**Citation issued**

☐

**Source Registration:**

**Reason:**

**Refer to Source**

**Registration for**

**Confirmation:**

**Resolution Comments:**

**IF THE PROBLEM TO BE RESOLVED IS DIFFERENT THAN THE SR TYPE REPORTED:**

Select the appropriate Resolution SR Type from the lists provided below to indicate the work that is required to resolve the issue

**Select Group:**

**Select Resolution SR**

**Type:**

**Department**

**Division**

**Type**

**Group**

**SLA**

**CodebookCodeCompare**

SUBMIT

PRINT

SUBMIT AND CHANGE SR TYPE